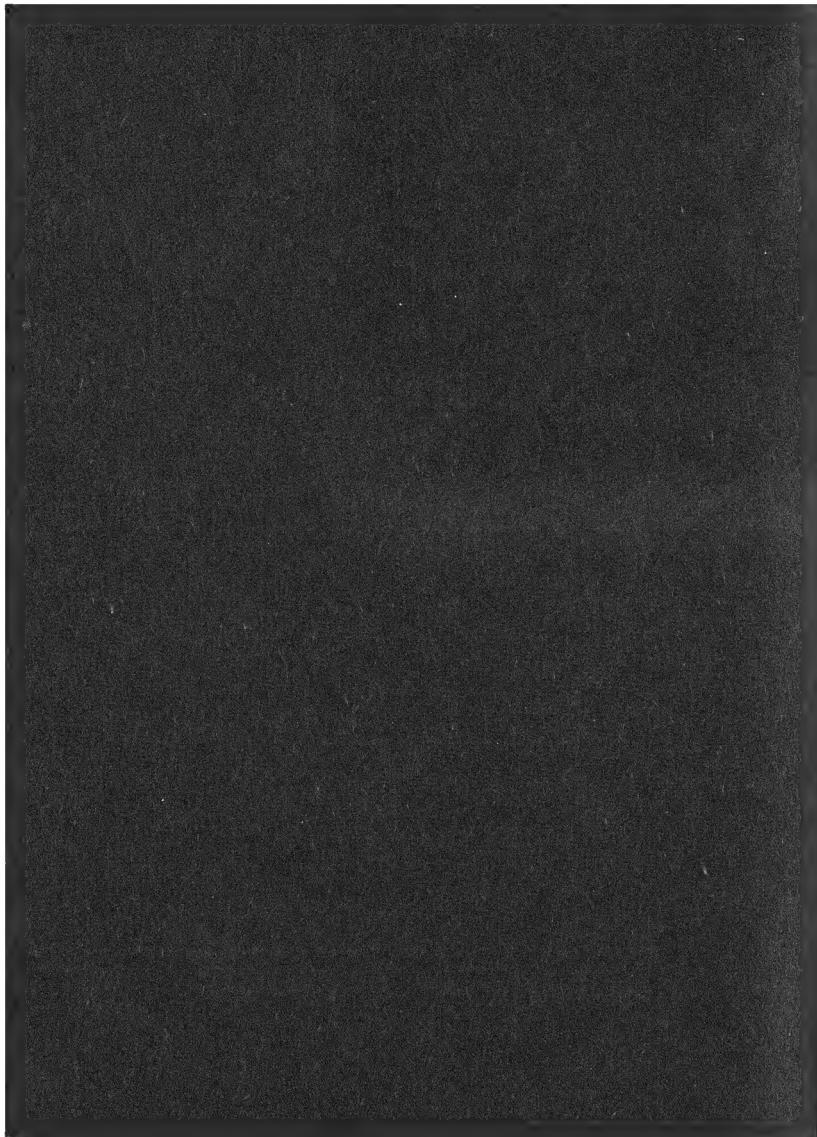


CONSTITUTION  
By-Laws and Code of Ethics

—OF THE—

Manitoba Medical Association.

ORGANIZED 1908.



*1908*  
*Dr. Bawden*

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**CONSTITUTION AND BY-LAWS**

**OF**

**Manitoba Medical Association.**

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**Art. 1--Name.**

This society shall be known as the Manitoba Medical Association.

**Art. 2—Objects.**

The objects of this association shall be the promotion of the medical and allied sciences, the maintenance of the honor and interests of the medical profession and of the members thereof collectively and individually, and the co-operation of the members of the association for their mutual assistance and support in all matters affecting them in their professional capacity.

**Art. 3—Affiliated Societies.**

All societies or associations devoted to medicine or allied sciences within the Province of Manitoba at present existing or which hereafter may be organized, may by a special resolution of the said society or association become branches of, or affiliated with the Manitoba Medical Association, by subscribing to its constitution, by-laws and code of ethics, and by securing the approval of the executive committee.

**Art. 4—Members.**

The members shall be composed of

1. Ordinary members.
2. Honorary members.
3. Members by invitation.

**SECTION 1.—Ordinary Members must be**

- a. Regularly qualified medical practitioners residing in the Province of Manitoba.
- b. Those engaged in teaching or research work in medicine or the allied sciences in the Province of Manitoba.

**SECTION 2.—Honorary Members.** Any member of the Medical profession or allied sciences who has become specially distinguished may be elected an honorary member of the association on nomination by the executive. An honorary member shall be entitled to participate in all the proceedings of the association, except voting, without contributing to its funds.

**SECTION 3.—Members by Invitation.** Medical practitioners or distinguished scientists, non-resident in Manitoba, may be received as members upon invitation of the association or its executive. They shall hold their connection until the close of the meeting at which they are introduced and may participate in all the affairs of the meeting except voting.

**Art. 5.—Officers.**

The officers of this association shall consist of a President, First and Second Vice-Presidents, Honorary Secretary and Honorary Treasurer.

These officers shall be elected annually and shall enter upon their several duties as laid down by the by-laws at the close of the annual meeting at which they have been elected.

**Art. 6—Committees.**

*a.* The Executive Committee shall be composed of the officers, together with five members elected annually, one representing and resident in each of the five judicial districts of the province. Quorum—A majority of members of the committee shall constitute a quorum.

*b.* Special committees may be appointed by the executive to carry out special purposes. A majority shall form a quorum and they shall elect a chairman and secretary. They shall be discharged ipso facto as soon as the purpose for which they were appointed shall have been served.

**Art. 7—Funds and Appropriations.**

Every ordinary member shall pay the Treasurer an annual fee of two dollars (\$2.00) at every annual meeting that he attends.

The funds so raised shall be appropriated to defray the expenses of the annual meetings, and for such other objects as may be deemed proper.

**Art. 8—Duties of Officers and Executive Committee.**

The President shall preside at all meetings of the Association and perform all other duties that custom, parliamentary practice and usage may require. He shall sign all

orders for payment of money drawn on the Treasurer by the Secretary.

He shall deliver an address at the annual meeting.

He shall appoint two auditors at the annual meeting.

He shall appoint all committees not otherwise provided for.

The President shall be ex-officio a member of all committees.

The 1st Vice-President shall, in the absence of the President, perform his duties, and in his absence the 2nd Vice-President shall act.

The Secretary shall attend all the meetings of the Association, with the records, documents and papers belonging thereto. He shall record and authenticate the proceedings of all meetings, give due notice to each member by postal card or circular, and duly notify the medical journals of the Province of the time and place of the annual and special meetings, notify all members of committees of their appointment and duties, hold correspondence with other organized medical associations, preserve the archives, published transactions and essays belonging to the Association, and perform such other duties as may be required of him by the Association or President. He shall be ex-officio a member of all committees.

The Treasurer shall collect the dues and demands of the Association from the members, and hold the same in trust for the Association.

He shall at every annual meeting, or oftener if required by the President, present his accounts, with the vouchers, duly audited and signed by the Auditing Committee, and at the end of his term of office shall

hand them to his successor or the President of the Association, together with the money, books and other property belonging to the Association.

He shall pay such orders as may be drawn on him by the Secretary, countersigned by the President.

The Executive Committee shall meet half an hour before each morning session, and at such other times as the interests of the Association shall require.

It shall be the duty of the Executive Committee to consider all applications for membership. It shall constitute a Board of Inquiry for the investigation of all charges against members of unprofessional conduct. It shall direct the publication of transactions and other matters connected with the Association, and shall decide as to the publication of papers by "title," "abstract," or in "extenso." It shall, from time to time, report to the Association, otherwise its proceedings are to be considered confidential.

#### **Art. 9—Election of Officers and Executive Committee.**

The Officers and Executive Committee shall be elected by ballot on the morning of the second day of the annual meeting.

#### **Art. 10—Election of Members.**

Candidates, not coming into membership through affiliated societies, shall make an application in writing to the Secretary. The application must be endorsed by two members of the Association. It shall be referred to the Executive, and on their recommendation voted on at the next session of the Association. A majority of votes shall be necessary to elect.

**Art. 11—Meetings.**

The regular meetings of the Association shall be held annually at such time and place as may be determined by the Association at its previous annual meeting, in default of which the time and place shall be fixed by the Executive.

Fifteen ordinary members shall constitute a quorum for the transaction of business at any annual or special meeting.

Special meetings shall be called by the President upon a written requisition stating the objects of such meeting, signed by ten ordinary members.

**Art. 12—Order of Business.**

The following shall be the order of business at the regular meetings of the Association. The ordinary parliamentary rules shall govern the transaction of business during the meeting.

**a. GENERAL SESSIONS :**

1. Calling the meeting to order.
2. Reading of addresses and papers.
3. Discussions of papers.

**b. BUSINESS SESSION :**

1. Calling the meeting to order.
2. Minutes of last meeting.
3. The report of the Executive Committee.
4. Communications.
5. The Secretary shall report a synopsis of the work of the year.
6. The report of the Treasurer.
7. The report of the Special Committees.

8. The election of Officers and Executive Committees.
9. Unfinished Business.
10. New Business.
11. Installation of Officers.

#### **Art. 13—Members and their Duties.**

The time devoted to the reading of any paper or address, except otherwise determined by the consent of the meeting, shall not exceed fifteen minutes.

No person shall be permitted to address the Association unless a member thereof, and no member shall be permitted to speak more than once on the same subject, unless to explain. No member shall occupy more than five minutes at one time on any subject before the Association. The person who introduces a resolution may, by permission of the President or of the meeting, occupy a longer time if deemed necessary.

A copy of every address, or paper read before the Association shall at once be handed to the Secretary, and shall become the property of the Association, and shall be preserved with the other documents, etc.

Members desiring their papers to appear in any particular journal, shall present a duplicate copy, with the name of the journal marked thereon.

Any member appointed on a special committee who fails to report at the next succeeding meeting, shall not be continued on the same, unless a satisfactory reason be given.

All resolutions and motions shall be presented in writing.

**Art. 14—Amendments.**

All proposals for amendments or additions to the constitution or by-laws must be given in writing to the Honorary Secretary at least one month before the annual meeting, and must be laid by him before the Executive Committee and sanctioned by a two-thirds vote of that body present and voting, before it is submitted to the Association.

**Art. 15—Code of Ethics.**

The code of ethics of this Association shall be that adopted by the Canadian Medical Association, and shall be printed with the constitution.

# Code of Medical Ethics

CONSISTING OF

1. *The Duties of Physicians to their Patients, and of the Obligations of Patients to their Physicians.*
2. *The Duties of Physicians to each other, and to the Profession at large.*
3. *The Duties of the Profession to the Public, and of the Obligations of the Public to the Profession.*

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OF THE DUTIES OF PHYSICIANS TO THEIR PATIENTS, AND  
OF THE OBLIGATIONS OF PATIENTS TO  
THEIR PHYSICIANS.

## ART. I.—*Duties of Physicians to their Patients.*

1. A physician should not only be ready to obey the calls of the sick at all times, but his mind should be attuned to the greatness of his mission and its responsibilities. These obligations are the greater, because ordinarily there is no other tribunal to appeal to than his own conscience in case of neglect. Physicians ought, therefore, to minister to the sick with due regard to the importance of their office, reflecting that the comfort, health and lives of those committed to their charge depend on their skill, attention and fidelity. Physicians should unite tenderness with firmness, and condescension with authority, and thus inspire their patients with gratitude, respect and confidence.

2. Every case committed to the charge of the physician should be treated with serious attention and humanity. Reasonable allowance should be made for mental infirmity and the caprices of the sick. Secrecy and delicacy when required by peculiar circumstances should be strictly observed, and the familiar and confidential intercourse to which physicians are admitted in their professional visits should be used with discretion, and with the most scrupulous regard to fidelity and honor. The obligation to secrecy extends beyond the period of professional services; no circumstance connected with the privacies of personal or domestic life, infirmities of disposition, or stain of character, observed during professional attendance, should ever be divulged by the physician, except when he is imperatively required to do so. So great is the necessity of this obligation that courts of justice protect professional men in their observance of secrecy under certain circumstances.

3. Frequent visits to the sick are, in general, requisite, since they enable the physician to arrive at a more perfect knowledge of the disease, to meet promptly every change which may occur, and also tend to preserve the confidence of the patient. But unnecessary visits are to be avoided, as they give useless anxiety to the patient, tend to diminish the authority of the physician, and render him liable to be suspected of interested motives.

4. A physician should studiously avoid making gloomy prognostications, as they savor of empiricism, and magnify the importance of his services in the treatment of the disease. But he should not fail, on proper occasions, to give to the friends of the patient timely notice of danger when it really occurs; and even to the patient himself, if absolutely necessary. This office, however, is so peculiarly

alarming when executed by him, that it ought to be declined whenever it can be assigned to any other person of sufficient judgment and delicacy. For the physician should be the minister of hope and comfort to the sick, that by such cordials to the drooping spirit he may soothe the bed of death, revive expiring life, and counteract the depressing influence of those maladies which often disturb the tranquility of the most resigned in their last moments. The life of a sick person can be shortened, not only by the acts, but also by the words and manner of a physician. It is therefore a sacred duty to guard himself carefully in this respect, and avoid all things which have a tendency to discourage the patient and depress his spirits.

5. A physician ought not to abandon a patient because the case is deemed incurable, for his attendance may continue to be highly useful to the patient, and comforting to the relatives around him, even to the last period of a fatal malady, by alleviating pain and other symptoms, and by soothing mental anguish. To decline attendance, under such circumstances, would be sacrificing to fanciful delicacy and mistaken liberality, that moral duty which is independent of, and far superior to, all pecuniary considerations.

6. Consultation should be encouraged in difficult or protracted cases, as they give rise to confidence, energy and more enlarged views in practice.

7. The opportunity which a physician not infrequently enjoys of promoting and strengthening the good resolutions of his patients, suffering under the consequences of vicious conduct, ought never to be neglected. His counsels, or even remonstrances, will give satisfaction, not offence, if they be proffered with politeness and with a genuine love

of virtue and a sincere interest in the welfare of the patient to whom they are addressed.

*ART II.—Obligations of Patients to their Physicians.*

1. The members of the medical profession, upon whom so many arduous duties are imposed, and who are required to make so many sacrifices of ease, comfort and health for the welfare of mankind, have certainly a right to expect that patients should entertain a just sense of the duties which they owe to their medical attendants.
2. The first duty of a patient is to select as his medical adviser one who has received a regular professional education. In no trade or occupation does mankind rely on the skill of an untaught artist; and in medicine, confessedly the most difficult and intricate of the sciences, the world ought not to suppose that knowledge is intuitive.
3. Patients should prefer a physician whose habits of life are regular, and who is not devoted to company, pleasure, or any pursuit incompatible with his professional obligations. A patient should also confide the care of himself and his family as much as possible to one physician, for a medical man who has become acquainted with the peculiarities of constitution, habits and predispositions of those he attends, is more likely to be successful in his treatment than one who does not possess this knowledge. A patient who has thus selected his physician should always apply for medical advice even in what may appear to him trivial cases, for fatal results often supervene on the slightest accidents. It is of still more importance that he should apply for assistance in the early stage of violent diseases. It is to a neglect of this precept that medicine owes much of the uncertainty and imperfection with which it has been reproached.

4. Patients should faithfully and unreservedly communicate to their physician the supposed cause of their disease. This is the more important as many diseases of a mental origin simulate those depending on external causes, and yet are only to be cured by ministering to the mind diseased. A patient should never be afraid of thus making his physician his friend and adviser ; he should always bear in mind that a medical man is under the strongest obligations of secrecy. Even the female sex should never allow feelings of shame or delicacy to prevent their disclosing the seat, symptoms and causes of complaints peculiar to it. However commendable a modest reserve may be in the common occurrence of life, the too strict observance of it in medicine is often attended with the most serious consequences, and a patient may sink under a painful and loathsome disease which might have been readily prevented had timely intimation been given to the physician.

5. A patient should never weary his physician with a tedious detail of events or matters not appertaining to his disease. Even as relates to his actual symptoms he will convey much more real information by giving clear answers to interrogations, than by the most minute account of his own framing. Neither should he obtrude upon his physician the details of his business nor the history of his family concerns.

6. The obedience of a patient to the prescriptions of his physician should be prompt and implicit. He should never permit his own crude opinions as to their fitness to influence his attention to him. A failure in one particular may render an otherwise judicious treatment dangerous, and even fatal. This remark is equally applicable to diet, drink and exercise. As patients become convalescent they are very

apt to suppose that the rules prescribed for them may be disregarded, and the consequence, but too often, is a relapse. Patients should never allow themselves to be persuaded to take any medicine whatever that may be recommended to them by the self-constituted doctors and doctresses who are so frequently met with, and who pretend to possess infallible remedies for the cure of every disease. However simple some of their prescriptions may appear to be, it often happens that they are productive of much mischief, and in all cases they are injurious by contravening the plan of treatment adopted by the physician.

7. A patient should, if possible, avoid even the friendly visits of a physician who is not attending him, and when he does receive them he should never converse on the subject of his disease, as an observation may be made, without any intention of interference, which may destroy his confidence in the course he is pursuing and induce him to neglect the directions prescribed to him. A patient should never send for a consulting physician without the express consent of his own medical attendant. It is of great importance that physicians should act in concert; for although their modes of treatment may be attended with equal success when employed singly, yet conjointly they are very likely to be productive of disastrous results.

8. When a patient wishes to dismiss his physician, justice and common courtesy require that he should declare his reasons for so doing.

9. Patients should always, when practicable, send for their physician in the morning, before his usual hour for going out, for, by being early aware of the visits he has to pay during the day, the physician is able to apportion his time in such a manner as to prevent an interference of en-

gagements. Patients should also avoid calling on their medical adviser unnecessarily during the hours devoted to meals or sleep. They should always be in readiness to receive the visits of their physician, as the detention of a few minutes is often of serious inconvenience to him.

10. A patient should, after his recovery, entertain a just and enduring sense of the value of the services rendered him by his physician, for these are of such a character that no mere pecuniary acknowledgment can repay or cancel them.

#### OF THE DUTIES OF PHYSICIANS TO EACH OTHER, AND TO THE PROFESSION AT LARGE.

##### ART. I.—*Duties for the Support of Professional Character.*

1. Every individual, on entering the profession, as he becomes entitled to all its privileges and immunities, incurs an obligation to exert his abilities to maintain its dignity and honor, to exalt its standing, and to extend the bonds of usefulness. He should, therefore, observe strictly such laws as are instituted for the government of its members; should avoid all contumelious and sarcastic remarks relative to the faculty as a body; and while, by unwearied diligence, he resorts to every honorable means of enriching the science, he should entertain a due respect for his superiors, who have by their labors brought it to the elevated condition in which he finds it.

2. There is no profession from the members of which greater purity of character and a higher standard of moral excellence are required than the medical, and to obtain such eminence is a duty every physician owes alike to his profession and to his patients. It is due to the latter, as

without it he cannot command their respect and confidence ; and to both, because no scientific attainments can compensate for the want of correct moral principles. It is also incumbent upon the faculty to be temperate in all things, for the practice of physic requires the exercise of a clear and vigorous understanding ; and, on emergencies, for which no professional man should be unprepared, a steady hand, an acute eye and an unclouded head may be essential to the well-being and even to the life of a fellow-creature.

3. It is derogatory to the dignity of the profession to resort to public advertisements, or private cards, or hand-bills, inviting the attention of individuals affected with particular diseases, publicly offering advice and medicine to the poor gratis, or promising radical cures ; or to publish cases and operations in the daily prints, or suffer such publication to be made ; to invite laymen to be present at operations, to boast of cures and remedies, to adduce certificates of skill and success, or to perform any other similar acts. These are the ordinary practices of empirics, and are highly reprehensible in a regular physician. In the case, however, of a physician or surgeon commencing the practice of his profession or removing to another locality, a simple announcement by an unobtrusive card in the public prints is unobjectionable.

4. Equally derogatory to professional character is it for a physician to hold a patent for any surgical instrument or medicine, or to dispense a secret nostrum, whether it be the composition or exclusive property of himself or others. For, if such nostrum is of real efficacy, any concealment regarding it is inconsistent with beneficence and professional liberality ; and if mystery alone gives it value and import-

ance, such craft implies either disgraceful ignorance or fraudulent avarice. It is also reprehensible for physicians to give certificates attesting the efficacy of patent or secret medicines, or in any way to promote the use of them.

*ART. II.—Professional Services of Physicians to each other.*

1. All practitioners of medicine, their wives and their children while under the paternal care, are entitled to the gratuitous services of any one or more of the faculty residing near them, whose assistance may be desired. A physician afflicted with disease is usually an incompetent judge of his own case, and the natural anxiety and solicitude which he experiences at the sickness of a wife, a child, or any one who, by the ties of consanguinity is rendered peculiarly dear to him, tend to obscure his judgment, and produce timidity and irresolution in his practice. Under such circumstances medical men are peculiarly dependent upon each other, and kind offices and professional aid should always be cheerfully and gratuitously afforded. Visits ought not, however, to be obtruded officiously, as such unasked civility may give rise to embarrassment, or interfere with that choice on which confidence depends. But if a member of the faculty whose circumstances are affluent request attendance, and an honorarium be offered, it should not be declined, for no pecuniary obligation ought to be imposed which the party receiving it would wish not to incur.

*ART. III.—Of the Duties of Physicians as Respect Vicarious Offices.*

1. The affairs of life, the pursuit of health, and the various accidents and contingencies to which a medical man is peculiarly exposed, sometimes require him temporarily to

withdraw from his duties to his patients, and to request some of his professional brethren to officiate for him. Compliance with this request is an act of courtesy, which should always be performed with the utmost consideration for the interest and character of the family physician, and when exercised for a short period all the pecuniary obligations for such service should be awarded to him. But if a member of the profession neglect his business in quest of pleasure and amusement, he cannot be considered as entitled to the adventages of the frequent and long-continued exercise of this fraternal courtesy without awarding to the physician who officiates the fees arising from the discharge of his professional duties. In obstetrical and important surgical cases, which give rise to unusual fatigue, anxiety and responsibility, it is just that the fees accruing therefrom should be awarded to the physician who officiates.

*ART. IV.—Of the Duties of Physicians in Regard to Consultations.*

1. A regular medical education furnishes the only presumptive evidence of professional abilities and acquirements, and ought to be the only acknowledged right of an individual to exercise and honor his profession. Nevertheless, as in consultations the good of the patient is the sole object in view, and this is often dependent on personal confidence, no intelligent regular practitioner who has a license to practice from some medical board of known and acknowledged respectability, and who is in good moral and professional standing in the place in which he resides, should be fastidiously excluded from fellowship or his aid refused in consultation when it is requested by the patient. But no one can be considered as a regular practitioner or a fit associate in consultation whose practice is based on an

exclusive dogma, to the rejection of the accumulated experience of the profession, and of the aids actually furnished by anatomy, physiology, pathology and organic chemistry, or who assumes any special name or title but that of a physician or a surgeon.

2. In consultations, no rivalship or jealousy should be indulged ; candor, probity and all due respect should be exercised toward the physician having charge of the case.

3. In consultation, the attending physician should be the first to propose the necessary questions to the sick, after which the consulting physician or physicians should have the opportunity to make such further inquiries of the patient as may be necessary to satisfy him or them of the true character of the case. They should then retire to a private place for deliberation, and the one first in attendance should communicate the directions agreed upon to the patient or his friends, as well as any opinions which it may be thought proper to express. But no statement or discussion of it should take place before the patient or his friends except in the presence of all the faculty attending, and by their common consent, and no opinions or prognostications should be delivered which are not the result of previous deliberation and concurrence.

4. In consultations the physician in attendance should deliver his opinion first ; and when there are several consulting the junior should deliver his opinion first, and so on in the order of seniority. No decision, however, should restrain the attending physician from making such variations in the mode of treatment as any subsequent unexpected change in the character of the case may demand. But such variation, and the reasons for it, ought to be carefully detailed at the next meeting in consultation. The

same privilege belongs also to the consulting physician if he is sent for in an emergency, when the regular attendant is out of the way, and similar explanations must be made by him at the next consultation.

5. The utmost punctuality should be observed in the visits of the physicians when they are to hold consultation together, and this is generally practicable, for society has been considerate enough to allow the plea of a professional engagement to take precedence of all others, and to be an ample reason for the relinquishment of any present occupation. But, as professional engagements may sometimes interfere and delay one of the parties, the physician who first arrives should wait for his associate a reasonable period, after which the consultation should be considered as postponed to a new appointment. If it be the attending physician who is present he will, of course, see the patient and prescribe; but if it be the consulting one he should retire, except in case of emergency, or when he has been called from a considerable distance, in which latter case he may examine the patient and give his opinion in writing, and under seal, to be delivered to his associate.

6. In consultations theoretical discussions should be avoided as occasioning perplexity and loss of time. For there may be much diversity of opinion concerning speculative points, with perfect agreement in those modes of practice which are founded, not on hypothesis, but on experience and observation.

7. All discussions in consultation should be held as secret and confidential. Neither by words nor manner should any of the parties to a consultation assert or insinuate that any part of the treatment pursued did not receive his assent. The responsibility must be equally divided be-

tween the medical attendants, and they must equally share the credit of success as well as the blame of failure.

8. Should an irreconcilable diversity of opinion occur when several physicians are called upon to consult together, the opinion of the majority should be considered as decisive; but if the members be equal on each side, then the decision shall rest with the attending physician. It may, however, sometimes happen that the two physicians cannot agree in their views of the nature of a case and the treatment to be pursued. This is a circumstance much to be deplored, and should always be avoided if possible by mutual concessions, as far as they can be justified by a conscientious regard for the dictates of judgment; but in the event of its occurrence, a third physician should, if practicable, be called to act as umpire, and if circumstances prevent the adoption of this course it must be left to the patient to select the physician in whom he is most willing to confide. But as every physician relies upon the rectitude of his judgment he should, when left in the minority, politely and consistently retire from any further deliberation in the consultation, or participation in the management of the case.

9. As circumstances sometimes occur to render a special consultation advisable, when the continued attendance of two physicians might be objectionable to the patient, the member of the faculty whose assistance is required in such cases should sedulously guard against all future unsolicited attendance. As such consultations require an extraordinary portion both of time and attention, at least a double honorarium may be reasonably expected.

10. A physician who is called upon to consult should observe the most honorable and scrupulous regard for the

character and standing of the practitioner in attendance. The practice of the latter, if necessary, should be justified as far as it can be consistently with a conscientious regard for truth, and no hint or insinuation should be thrown out which could impair the confidence reposed in him, or affect his reputation. The consulting physician should also carefully refrain from any of those extraordinary attentions or assiduities which are too often practised by the dishonest for the base purpose of gaining applause, or ingratiating themselves into the favor of families and individuals.

*ART. V.—Duties of Physicians in Case of Interference.*

1. Medicine is a liberal profession, and those admitted into its ranks should found their expectations of practice upon the extent of their qualifications, not on intrigue or artifice.
2. A physician, in his intercourse with a patient under the care of another practitioner, should observe the strictest caution and reserve. No meddling inquiries should be made, no disingenuous hints given relative to the nature and treatment of his disorder, nor any course of conduct pursued that may directly or indirectly tend to diminish the trust reposed in the physician employed.
3. The same circumspection and reserve should be observed when, from motives of business or friendship, a physician is prompted to visit an individual who is under the direction of another practitioner. Indeed, such visits should be avoided except under peculiar circumstances, and when they are made no particular inquiries should be instituted relative to the nature of the disease or the remedies employed, but the topics of conversation should be as foreign to the case as circumstances will admit.

4. A physician ought not to take charge of or prescribe for a patient who has recently been under the care of another member of the faculty in the same illness, except in cases of sudden emergency or in consultation with the physician previously in attendance, or when the latter has relinquished the case or been regularly notified that his services are no longer desired. Under such circumstances no unjust, illiberal insinuations should be thrown out in relation to the conduct or practice previously pursued, which should be justified as far as candor and regard for truth and probity will permit, for it often happens that patients become dissatisfied when they do not experience immediate relief, and, as many diseases are protracted, the want of success in the first stage of the treatment affords no evidence of a lack of professional knowledge and skill.

5. When a physician is called to an urgent case because the family attendant is not at hand, he ought, unless his assistance in consultation be desired, to resign the care of the patient to the latter immediately on his arrival.

6. It often happens in cases of sudden illness or of recent accidents and injuries, owing to the alarm and anxiety of friends, that a number of physicians are simultaneously sent for. Under the circumstances courtesy should assign the patient to the first who arrived, who shall select from those present any additional assistance that he shall deem necessary. In all such cases, however, the practitioner who officiated should request the family physician, if there be one, to be called, and unless his further attendance be requested, should resign the case to the latter on his arrival.

7. When a physician is called to the patient of another practitioner, in consequence of the sickness or absence of the latter, he ought, on the return or recovery of the regu-

lar attendant, and with the consent of the patient, to surrender the case.

8. A physician when visiting a sick person in the country may be desired to see a neighboring patient who is under the regular direction of another physician, in consequence of some sudden change or aggravation of symptoms. The conduct to be pursued on such an occasion is to give advice adapted to present circumstances : to interfere no further than is absolutely necessary with the general plan of treatment ; to assume no further direction unless it be expressly desired ; and, in this last case, to request an immediate consultation with the practitioner previously employed.

9. A wealthy physician should not give advice gratis to the affluent, because his doing so is an injury to his professional brethren. The office of a physician can never be supported as an exclusively beneficial one, and it is defrauding, in some degree, the common funds for its support when fees are dispensed with which might justly be claimed.

10. When a physician who has been engaged to attend a case of midwifery is absent, and another is sent for, if delivery is accomplished during the attendance of the latter he is entitled to the fee, but should resign the patient to the practitioner first engaged.

#### *ART. VI.—Of Differences between Physicians.*

1. Diversity of opinion and opposition of interest may, in the medical as in other professions, sometimes occasion controversy and even contention. Whenever such cases unfortunately occur and cannot be immediately terminated, they should be referred to the arbitration of a sufficient number of physicians or a court medical.

2. As peculiar reserve must be maintained by physicians towards the public in regard to professional matters, and as there exist numerous points in medical ethics and etiquette, through which the feelings of medical men may be painfully assailed in their intercourse with each other, and which cannot be understood or appreciated by general society, neither the subject matter of such differences nor the adjudication of the arbitrators should be made public, as publicity in a case of this nature may be injurious to the individuals concerned, and can hardly fail to bring discredit on the faculty.

**ART. VII.—*Of Pecuniary Acknowledgments.***

Some general rules should be adopted by the faculty in every town or district relative to pecuniary acknowledgments from their patients, and it should be deemed a point of honor to adhere to these rules with as much uniformity as varying circumstances will admit.

**OF THE DUTIES OF THE PROFESSION TO THE PUBLIC, AND  
OF THE OBLIGATIONS OF THE PUBLIC TO THE  
PROFESSION.**

**ART. I.—*Duties of the Profession to the Public.***

1. As good citizens it is the duty of physicians to be ever diligent and vigilant for the welfare of the community, and to bear their part in sustaining its institutions and burdens. They should also be ever ready to give counsel to the public in relation to matters especially appertaining to their profession, as on subjects of medical police, public hygiene and legal medicine. It is their province to enlighten the public in regard to quarantine regulations, the location, arrangement and dietaries of hospitals, asylums, schools, prisons, and similar institutions ; in relation to the medi-

cal police of towns, as drainage, ventilation, etc., and in regard to measures for the prevention of epidemic and contagious diseases, and when pestilence prevails it is their duty to face the danger and to continue their labors for the alleviation of the suffering, even at the jeopardy of their own lives.

2. Medical men should also always be ready when called on by the legally constituted authorities to enlighten coroners' inquests and courts of justice on subjects strictly medical, such as involve questions relating to sanity, legitimacy, murder by poison or other violent means, and in regard to the various other subjects embraced in the science of medical jurisprudence ; but in these cases, and especially when they are required to make a post-mortem examination, it is just, in consequence of the time, labor and skill required, and the responsibility and risk they incur, that the public should award them a proper honorarium. Medical men should also be properly paid for attendance as witnesses in certain cases.

3. There is no profession by the members of which eleemosynary services are more liberally dispensed than the medical ; but justice requires that some limits should be placed to the performance of such good offices. Poverty, professional brotherhood, and certain of the public duties referred to in the first section of this article, should always be recognized as presenting valid claims for gratuitous services ; but neither institutions endowed by the public or rich individuals, societies for mutual benefit, for the insurance of lives (the certificates for which should be sent confidentially to the company and paid for), whether furnished by the medical adviser of the company or by the family physician, or for analogous purposes, nor any profession

or occupation can be admitted to possess such privilege. Nor can it be justly expected of physicians to furnish certificates of inability to serve on juries, to perform militia duty or to testify to the state of health of persons wishing to insure their lives, obtain pensions or the like, without a pecuniary acknowledgment. But to individuals in indigent circumstances such professional services should always be cheerfully and freely accorded.

4. It is the duty of physicians, who are frequent witnesses of the enormities committed by quackery, and the injury to health and even destruction of life caused by the use of quack medicines, to enlighten the public on these subjects, to expose the injuries sustained by the unwary from the devices and pretensions of artful empirics and imposters. Physicians ought to use all the influence which they may possess by exercising their option in regard to the shops to which their prescriptions shall be sent, to discourage druggists and apothecaries vending quack or secret medicines, or from being in any way engaged in their manufacture and sale.

#### *ART. II.—Obligations of the Public to Physicians.*

1. The benefits accruing to the public, directly and indirectly, from the active and unwearied beneficence of the profession, are so numerous and important that physicians are justly entitled to the utmost consideration and respect from the community. The public ought likewise to entertain a just appreciation of medical qualification ; to make a proper discrimination between true science and the assumption of ignorance and empiricism, and to afford every encouragement and facility for the acquisition of medical education.

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1908.

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